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November 13, 2000

Assistant Commissioner For Patents  
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Washington, D.C. 20231

**Re: U.S. Patent Application Serial No. 09/108,189**  
**For: METHOD AND APPARATUS FOR THE SURGICAL**  
**REPAIR OF ANEURYSMS**  
**Our Reference: 23660-00611**

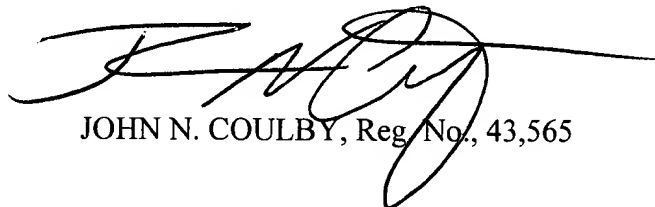
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Dear Sir:

Transmitted herewith for filing in the U.S. Patent and Trademark Office in connection with the above-referenced application are the following documents: (1) Transmittal Form; (2) Amendment and Response Under 37 CFR § 1.116; and (3) Request for Approval of Drawing Corrections.

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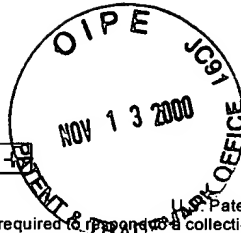
Sincerely yours,



JOHN N. COULBY, Reg. No., 43,565

Enclosures

Please type a plus sign (+) inside this box →



PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

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<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/108,189	
	Filing Date	July 1, 1998	
	First Named Inventor	Howard Tanner, et al.	
	Group Art Unit	3762	
	Examiner Name	J. Thissel	
Total Number of Pages in This Submission	//	Attorney Docket Number	23660-00611

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <b>Request for Approval of Drawing Corrections</b>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	JOHN N. COULBY, Reg. No. 43,565
Signature	
Date	November 13, 2000

CERTIFICATE OF MAILING	
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